TMA DoD Pharmacoeconomic Center
Fort Sam Houston, TX

MTF Quarterly Webcast

LTC Stacia Spridgen
Director, DoD Pharmacoeconomic Center

Introduction

- Greetings from the PEC
- Purpose of the Quarterly MTF Webcast
- DCO Ground Rules
  - Type questions into DCO system
  - Put on mute, not on hold
  - Contingency plan if DCO system quits working

Review of P&T Activities

Teresa M. Anekwe, PharmD, BCPS
Clinical Pharmacist

Basal insulins

Uniform Formulary (UF) Basal Insulins		Non-Formulary Basal Insulins
Basal Insulins on BCF MTFs must have on formulary	**Basal Insulins not on BCF MTFs may have on formulary**	**Basal Insulins MTFs must not have on formulary**
Insulin glargine 100 u/ml 10 ml vial (Lantus) 3 ml pens (SoloStar)	Insulin detemir 100 u/ml 10 ml vial (Levemir)	Insulin detemir 100 u/ml 3 ml pen (Flexpen)

Clotting Factors

- **The factor VIII product Xyntha be designated as ECF on the UF.**
- **The factor IX product BeneFIX be designated as ECF on the UF.**

Formulary

Items retain formulary status on the UF

- **Guanfacine ER (Intuniv)**
- **Morphine ER/naltrexone (Embeda) retained**

a. The following drugs were designated non-formulary on the Uniform Formulary (UF):

i. Telmasartan/amlodipine (Twynsta)

ii. Aliskiren/valsartan (Valturna)

iii. Zolpidem sublingual (Edluar)

All have 60 day implementation dates

Other items

- PDE-5 use for post prost – up to 1 year
- Sumavel (sumatriptan needleless) QL
- VA-DoD insulin contact
- 703 update
- Prices take 2 weeks to load

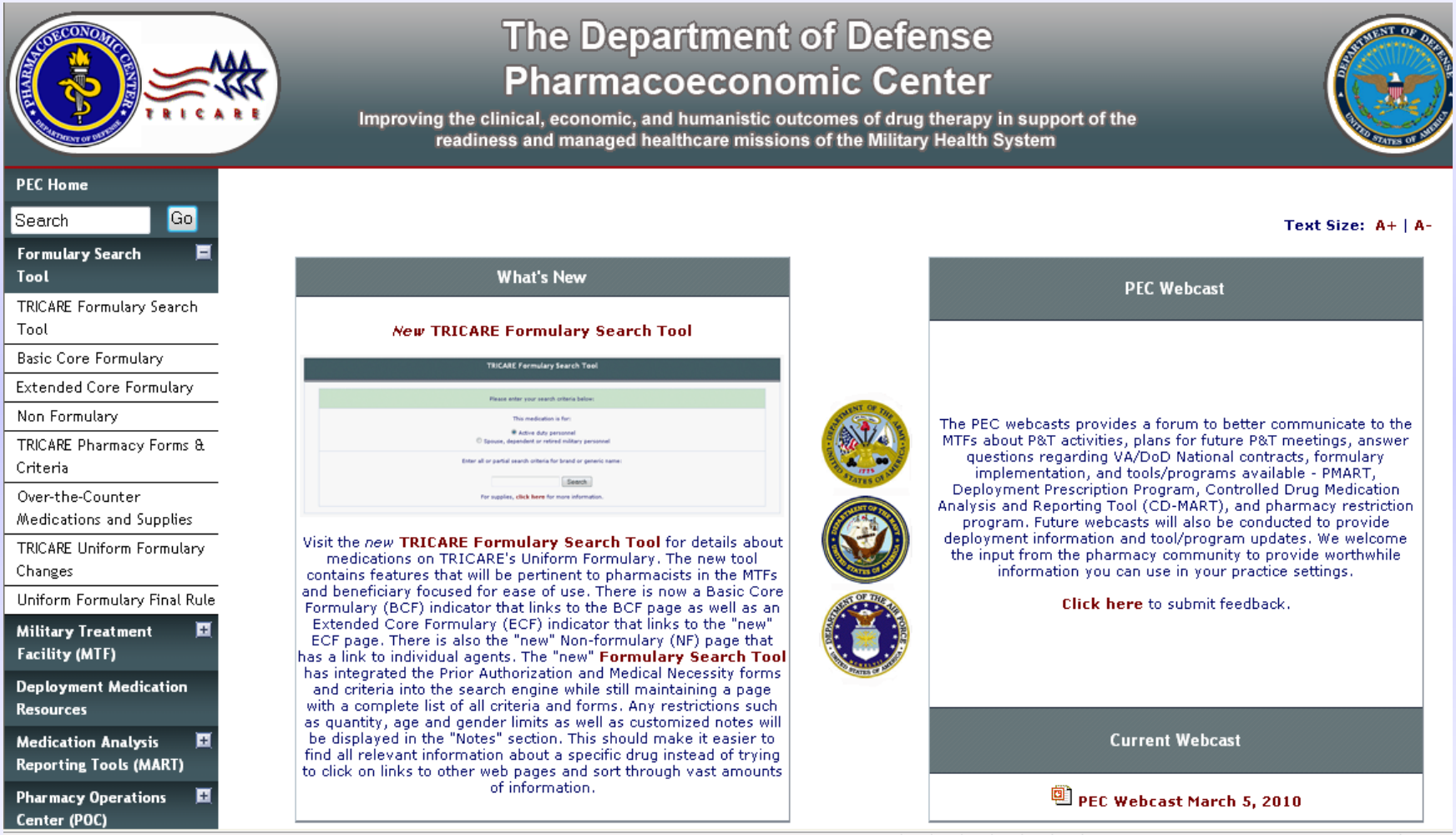
Ongoing and future meetings

- **May – expect signing late June/early July**
  - **Lipids**
  - **BPH drugs**
- **Aug**
  - **ARB/ACE/DRI and combos**
  - **Eye NSAID/Mast Cell Stabilizers/Antihistamines**

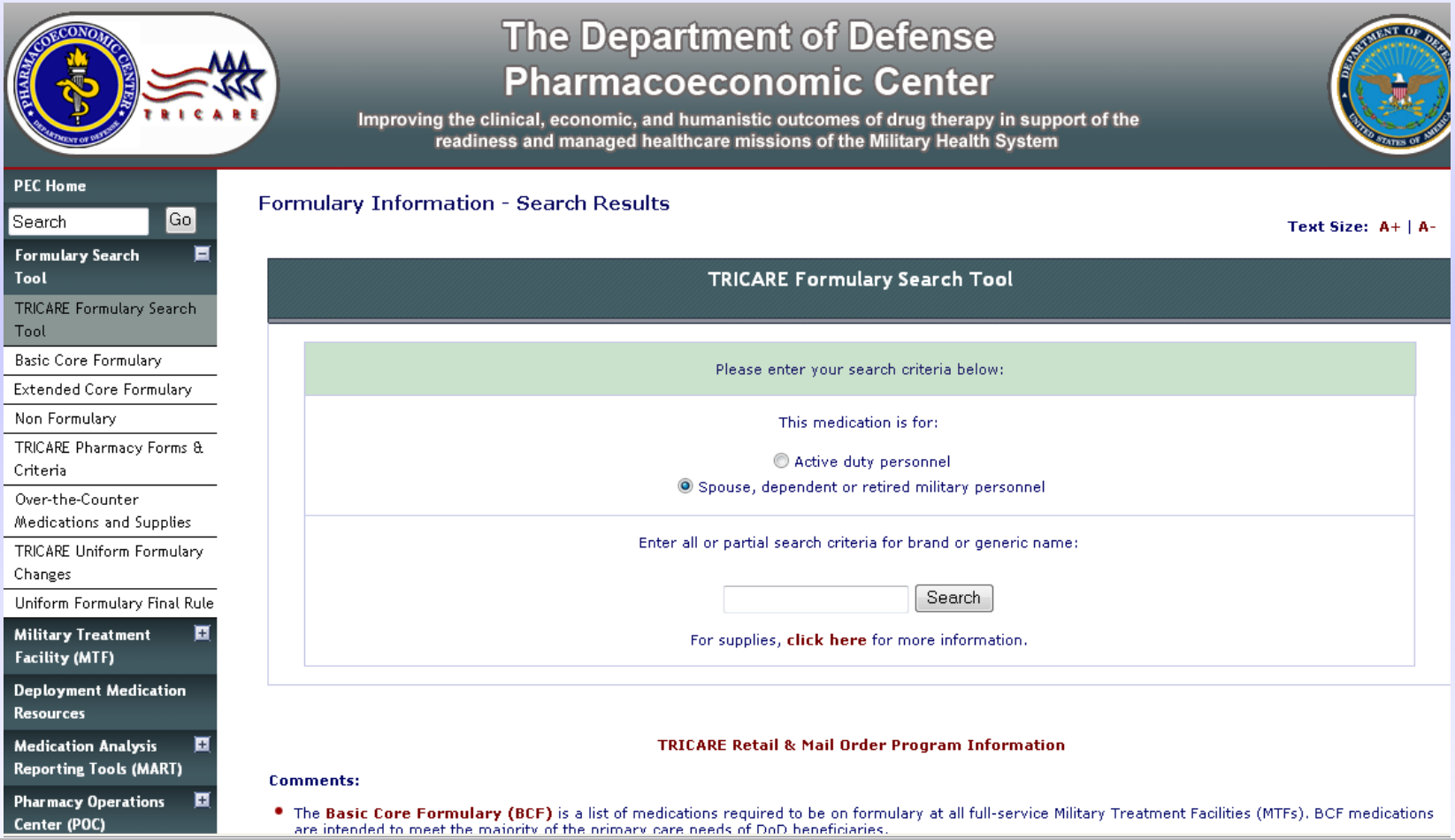
Website:
Formulary Search Tool

Dr. Jeremy Briggs PharmD, MBA, Lean Six Sigma Black Bel
Industry Liaison

New TRICARE Formulary Search Tool


The Department of Defense
Pharmacoeconomic Center
Improving the clinical, economic, and humanistic outcomes of drug therapy in support of the readiness and managed healthcare missions of the Military Health System
PEC Home
Search
Go
Formulary Search Tool
TRICARE Formulary Search Tool
Basic Core Formulary
Extended Core Formulary
Non Formulary
TRICARE Pharmacy Forms & Criteria
Over-the-Counter Medications and Supplies
TRICARE Uniform Formulary Changes
Uniform Formulary Final Rule
Military Treatment Facility (MTF)
Deployment Medication Resources
Medication Analysis Reporting Tools (MART)
Pharmacy Operations Center (POC)
Text Size: A+ | A-
What's New
New TRICARE Formulary Search Tool
Visit the new TRICARE Formulary Search Tool for details about medications on TRICARE's Uniform Formulary. The new tool contains features that will be pertinent to pharmacists in the MTFs and beneficiary focused for ease of use. There is now a Basic Core Formulary (BCF) indicator that links to the BCF page as well as an Extended Core Formulary (ECF) indicator that links to the "new" ECF page. There is also the "new" Non-formulary (NF) page that has a link to individual agents. The "new" Formulary Search Tool has integrated the Prior Authorization and Medical Necessity forms and criteria into the search engine while still maintaining a page with a complete list of all criteria and forms. Any restrictions such as quantity, age and gender limits as well as customized notes will be displayed in the "Notes" section. This should make it easier to find all relevant information about a specific drug instead of trying to click on links to other web pages and sort through vast amounts of information.
PEC Webcast
The PEC webcasts provides a forum to better communicate to the MTFs about P&T activities, plans for future P&T meetings, answer questions regarding VA/DoD National contracts, formulary implementation, and tools/programs available - PMART, Deployment Prescription Program, Controlled Drug Medication Analysis and Reporting Tool (CD-MART), and pharmacy restriction program. Future webcasts will also be conducted to provide deployment information and tool/program updates. We welcome the input from the pharmacy community to provide worthwhile information you can use in your practice settings.
Click here to submit feedback.
Current Webcast
PEC Webcast March 5, 2010

Start of Search


The Department of Defense
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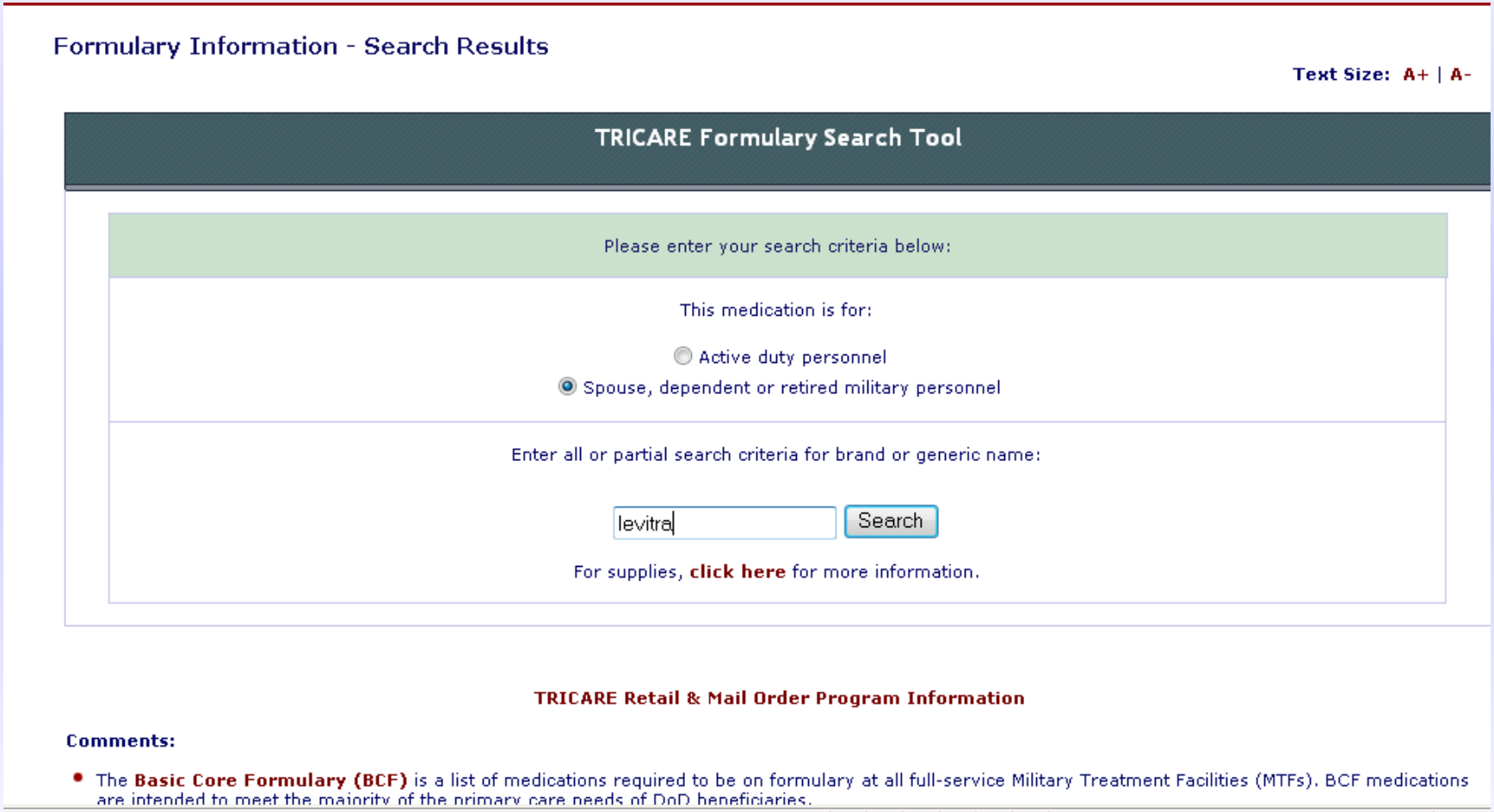
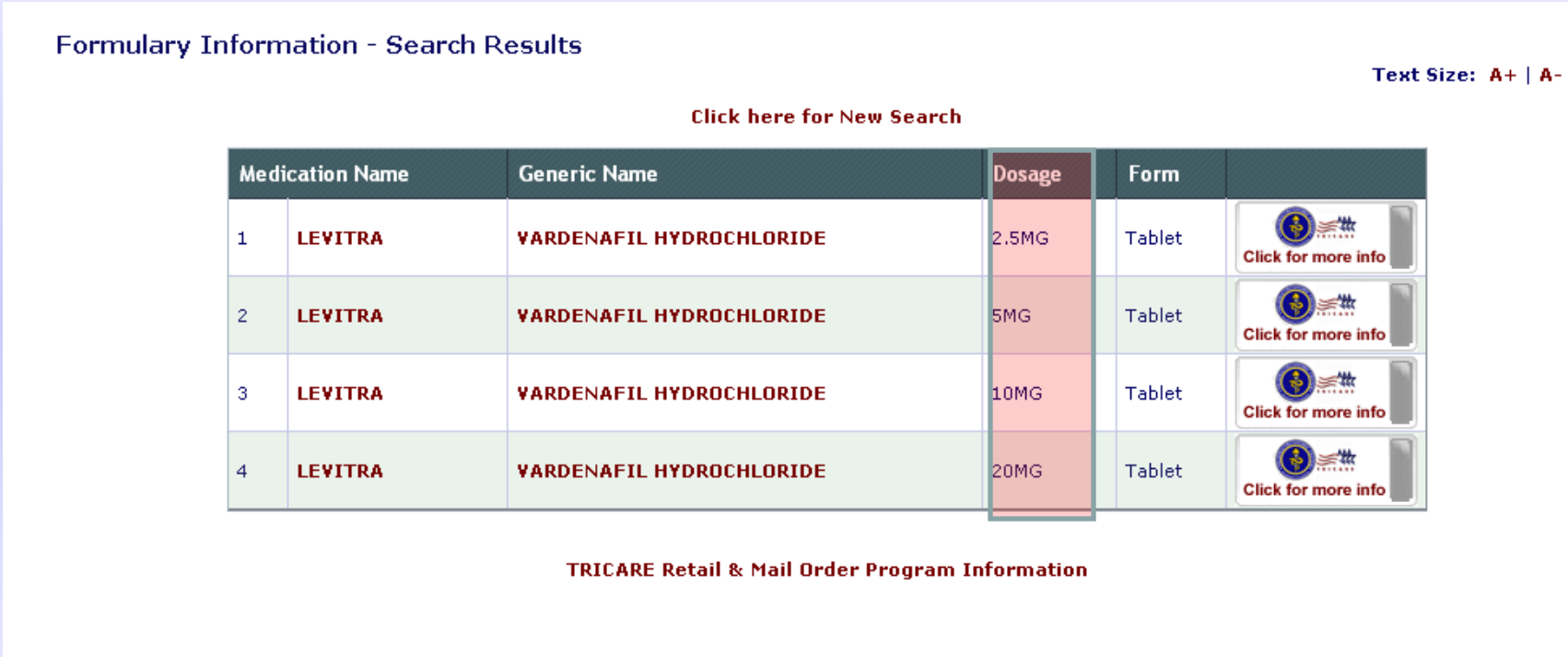
TRICARE Uniform Formulary Changes
Uniform Formulary Final Rule
Military Treatment Facility (MTF)
Deployment Medication Resources
Medication Analysis Reporting Tools (MART)
Pharmacy Operations Center (POC)
Formulary Information - Search Results
Text Size: A+ | A-
TRICARE Formulary Search Tool
Please enter your search criteria below:
This medication is for:
Active duty personnel
Spouse, dependent or retired military personnel
Enter all or partial search criteria for brand or generic name:
Search
For supplies, click here for more information.
TRICARE Retail & Mail Order Program Information
Comments:
The Basic Core Formulary (BCF) is a list of medications required to be on formulary at all full-service Military Treatment Facilities (MTFs). BCF medications

Type in brand or generic name


Formulary Information - Search Results
Text Size: A+ | A-
TRICARE Formulary Search Tool
Please enter your search criteria below:
This medication is for:
Active duty personnel
Spouse, dependent or retired military personnel
Enter all or partial search criteria for brand or generic name:
levitra
Search
For supplies, click here for more information.
TRICARE Retail & Mail Order Program Information
Comments:
The Basic Core Formulary (BCF) is a list of medications required to be on formulary at all full-service Military Treatment Facilities (MTFs). BCF medications

Result(s) show only drug name

“Dosage” is new to the TRICARE Formulary Search Tool



Formulary Information - Search Results

Text Size: A+ | A-

Click here for New Search

	Medication Name	Generic Name	Dosage	Form	
1	LEVITRA	VARDENAFIL HYDROCHLORIDE	2.5MG	Tablet	Click for more info
2	LEVITRA	VARDENAFIL HYDROCHLORIDE	5MG	Tablet	Click for more info
3	LEVITRA	VARDENAFIL HYDROCHLORIDE	10MG	Tablet	Click for more info
4	LEVITRA	VARDENAFIL HYDROCHLORIDE	20MG	Tablet	Click for more info

TRICARE Retail & Mail Order Program Information

Final Result brings all relevant drug information into one page

Formulary Information - Formulary Search Tool

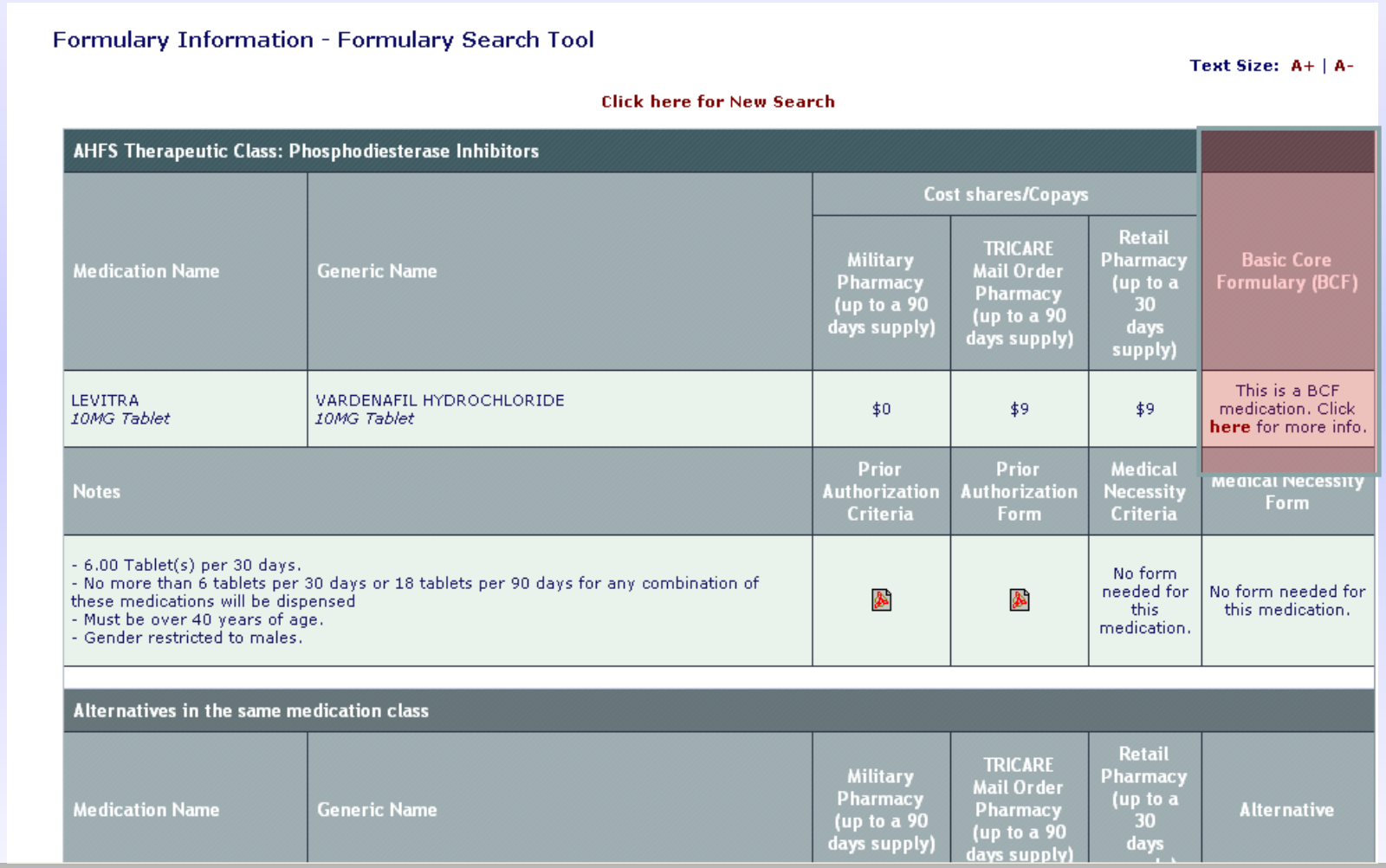
Text Size: A+ | A-

Click here for New Search

AHFS Therapeutic Class: Phosphodiesterase Inhibitors					
Medication Name	Generic Name	Cost shares/Copays			Basic Core Formulary (BCF)
		Military Pharmacy (up to a 90 days supply)	TRICARE Mail Order Pharmacy (up to a 90 days supply)	Retail Pharmacy (up to a 30 days supply)	
LEVITRA *10MG Tablet*	VARDENAFIL HYDROCHLORIDE *10MG Tablet*	$0	$9	$9	This is a BCF medication. Click **here** for more info.
Notes		**Prior Authorization Criteria**	**Prior Authorization Form**	**Medical Necessity Criteria**	**Medical Necessity Form**
- 6.00 Tablet(s) per 30 days. - No more than 6 tablets per 30 days or 18 tablets per 90 days for any combination of these medications will be dispensed - Must be over 40 years of age. - Gender restricted to males.				No form needed for this medication.	No form needed for this medication.

Alternatives in the same medication class					
Medication Name	Generic Name	Military Pharmacy (up to a 90 days supply)	TRICARE Mail Order Pharmacy (up to a 90 days supply)	Retail Pharmacy (up to a 30 days	Alternative

Basic Core Formulary (BCF) Tag



Formulary Information - Formulary Search Tool

Text Size: A+ | A-

Click here for New Search

AHFS Therapeutic Class: Phosphodiesterase Inhibitors					
Medication Name	Generic Name	Cost shares/Copays: Military Pharmacy (up to a 90 days supply)	Cost shares/Copays: TRICARE Mail Order Pharmacy (up to a 90 days supply)	Cost shares/Copays: Retail Pharmacy (up to a 30 days supply)	Basic Core Formulary (BCF)
LEVITRA *10MG Tablet*	VARDENAFIL HYDROCHLORIDE *10MG Tablet*	$0	$9	$9	This is a BCF medication. Click **here** for more info.
Notes		**Prior Authorization Criteria**	**Prior Authorization Form**	**Medical Necessity Criteria**	**Medical Necessity Form**
- 6.00 Tablet(s) per 30 days. - No more than 6 tablets per 30 days or 18 tablets per 90 days for any combination of these medications will be dispensed - Must be over 40 years of age. - Gender restricted to males.				No form needed for this medication.	No form needed for this medication.

Alternatives in the same medication class					
Medication Name	Generic Name	Military Pharmacy (up to a 90 days supply)	TRICARE Mail Order Pharmacy (up to a 90 days supply)	Retail Pharmacy (up to a 30 days	Alternative

Extended Core Formulary (ECF) Tag

Formulary Information - Formulary Search Tool

Text Size: A+ | A-

Click here for New Search

AHFS Therapeutic Class: Disease-modifying Antirheumatic Agents					
Medication Name	Generic Name	Cost shares/Copays: Military Pharmacy (up to a 90 days supply)	Cost shares/Copays: TRICARE Mail Order Pharmacy (up to a 90 days supply)	Cost shares/Copays: Retail Pharmacy (up to a 30 days supply)	Extended Core Formulary (ECF)
HUMIRA *20MG/0.4ML Kit*	ADALIMUMAB *20MG/0.4ML Kit*	$0	$9	$9	This is an ECF medication. Click **here** for more info.
Notes		**Prior Authorization Criteria**	**Prior Authorization Form**	**Medical Necessity Criteria**	**Medical Necessity Form**
- 2.00 Kit(s) per 28 days. - 4 Kits per 56 days				No form needed for this medication.	No form needed for this medication.
Alternatives in the same medication class					

ECF Webpage

Formulary Information - Extended Core Formulary (ECF)

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The **Extended Core Formulary (ECF)** includes medications in therapeutic classes that are used to support more specialized scopes of practice than those on the Basic Core Formulary (BCF). MTFs may choose whether or not to include an ECF therapeutic class on formulary, based on the clinical needs of its patients. However, if an MTF chooses to have an ECF therapeutic class on formulary, it must have all ECF medications in that class on formulary.

Medications are selected for the ECF because they offer significant clinical or cost-effectiveness advantages to MTFs compared to other medications in a therapeutic class. MTFs should utilize BCF or ECF medications to the greatest extent consistent with the clinical needs of their patients.

The **TRICARE Uniform Formulary** and **national pharmaceutical contracts** also affect what medications MTFs are allowed to have on formulary. The following table outlines MTF formulary requirements:

MTFs MUST have on formulary	MTFs MAY have on formulary	MTFs MUST NOT have on formulary
All BCF medications All ECF medications **if** the therapeutic class is on the MTF formulary	Medications that are on the Uniform Formulary, but not on the BCF or ECF Medications in classes not yet reviewed by the DoD P&T Committee for the Uniform Formulary, unless not allowed by a national pharmaceutical contract	Medications designated as non-formulary under the Uniform Formulary Medications that are not allowed on MTF formularies due to a **national pharmaceutical contract**.

The DoD P&T Committee is reviewing therapeutic classes for the UF on a class by class basis. For information on classes to be reviewed at upcoming meetings, please visit the **DoD P&T Committee schedule page**. The **DoD P&T Committee** makes recommendations regarding the formulary status of medications on the BCF, ECF, and UF to the Director, TRICARE Management Activity (TMA). The Director, TMA, makes final decisions after considering comments of the **Beneficiary Advisory Panel** (BAP).

References: HA policy 04-032, TRICARE Pharmacy Benefit Program Formulary Management, provides additional information about the BCF, ECF, and Uniform Formulary.

Special Notes

Listings for classes already reviewed by the DoD P&T Committee also include:

Medications designated as non-formulary under the Uniform Formulary. MTFs are not allowed to have these medications on their formularies.

Medications on the Uniform Formulary (UF), but not on the BCF or ECF. MTFs are not required to have any of these medications on formulary, but may choose to add one or more depending on local needs.

Brand names are provided for reference purposes and do not imply the recommendation of a specific product except when noted. For multi-source items, it is expected that the most favorably priced product will be used.

Uniform Formulary (Not BCF or ECF)

Formulary Information - Medication

Text Size: A+ | A-

Click here for New Search

AHFS Therapeutic Class: Aminopenicillins					
Medication Name	Generic Name	Cost shares/Copays			Military Treatment Facility Formulary Status
		Military Pharmacy (up to a 90 days supply)	TRICARE Mail Order Pharmacy (up to a 90 days supply)	Retail Pharmacy (up to a 30 days supply)	
AMOXICILLIN *500MG Tablet*	AMOXICILLIN *500MG Tablet*	$0	$3	$3	Check local formulary.
Notes		Prior Authorization Criteria	Prior Authorization Form	Medical Necessity Criteria	Medical Necessity Form
		No form needed for this medication.	No form needed for this medication.	No form needed for this medication.	No form needed for this medication.
Alternatives in the same medication class					

Non-Formulary

Formulary Information - Formulary Search Tool

Text Size: A+ | A-

Click here for New Search

AHFS Therapeutic Class: HMG-CoA Reductase Inhibitors					
Medication Name	Generic Name	Cost shares/Copays			Military Treatment Facility Formulary Status
		Military Pharmacy (up to a 90 days supply)	TRICARE Mail Order Pharmacy (up to a 90 days supply)	Retail Pharmacy (up to a 30 days supply)	
CRESTOR *10MG Tablet*	ROSUVASTATIN CALCIUM *10MG Tablet*	Non-Formulary	$22	$22	Military Treatment Facilities are not allowed to carry this product.
Notes		Prior Authorization Criteria	Prior Authorization Form	Medical Necessity Criteria	Medical Necessity Form
- Formulary alternatives are listed on this page. If non-formulary medications are determined to be medically necessary, lower formulary copay applies.		No form needed for this medication.	No form needed for this medication.		
Alternatives in the same medication class					

Notes

- Age limits
- Gender limits
- Quantity limits
- Clarifications on Kits, each etc.
- Customizable notes

Prior Authorization and Medical Necessity

- **Criteria and Forms associated with a drug now appear in the final search result**
  - **Decreased time to find correct form**
  - **Table with all PAs and MNs still available**

Alternatives

- Currently using AHFS classification for alternatives
- Expect to see a change to PEC Classification in the near future
- Order of appearance is from lowest to highest Tier

Pharmaceutical Contracting Issues

Dr. Jeremy Briggs PharmD, MBA, Lean Six Sigma Black Bel
Industry Liaison

Possible Cost Avoidance

- **Compare: Pricing**
- **Twinject**
- **Epipen**
- **Adrenaclick**

Flonase

- **Shortage due to Apotex (30% of market) no longer making generic product**
- **Prasco stopped making 31 May 2010**
- **Large price disparity**
- **Alternatives:**
  - **Flunisolide is now on National Contract**
  - **Mometasone (Nasonex)**

Warfarin

- National Contract item
- Hazardous waste
- Unit dose is for inpatient use only

MTF Prescription Restriction Program

Hector Morales
Deputy Director, TMA Pharmacy Operations Center

MTF Prescription Restriction Process

1. MTF providers identify beneficiary who may have “drug seeking behavior” or high risk of harming self or others
2. Use Pharmacy Data Transaction Service (PDTS) to set restriction
3. The provider has the option to:
    1. Restrict all meds to a specific pharmacy and/or provider
    2. Restrict controlled meds to a specific provider or list of providers
    3. Exclude controlled substances or specific non-controlled substance(s) at mail order or retail pharmacy

- The restriction form is available on the PEC website:

https://rxnet.army.mil/pec/pdts/pdts_mtfs.php?submenuheader=0

MTF Rx Restriction Request Form

Fax this form to the DoD Pharmacy Operations Center (POC) at (210) 295-2567
To contact the POC dial 1-866-275-4732, option 8

Version 5

Restricted Beneficiary's Information

Is member assigned to a WTU:

Last Name: First Name: M.I.:

Birth Date : Sponsor's SSN :

Sole Provider Information

Reason for Request:

Member has been notified of restriction ☐ Effective Date :

Note Medical Management Team should re-evaluate restriction requirement for member six months after effective date. Send update notification to the POC at pdts.ameddcs@amedd.army.mil

To Be Completed by Provider

Site / Company:

Sole Provider Phone Number: Sole Provider Email:

Sole Provider Printed Name / Title: Sole Provider Signature: Date :

Nurse Case Manager Printed Name: Nurse Case Manager Phone Number :

Nurse Case Manger Email:

MTF Pharmacist Information

To Be Completed by Pharmacy

MTF RPh Phone Number : MTF RPh Email

MTF RPh Printed Name / Title: MTF RPh Signature: Date :

Type of Lock

Note: The lock will prevent the member from using their TRICARE benefits at the mail order pharmacy or a retail pharmacy.

○ Restrict **all meds** for a beneficiary to a specific pharmacy **and/or** provider.

Provider Information:

Provider DEA / NPI #:

Pharmacy Information:

○ Restrict **controlled meds** for a beneficiary to a specific provider or list of providers. Authorized Prescriber's printed name and DEA / NPI:

OR

○ Exclude controlled substances from a beneficiary or specific non-controlled substance(s). Select Schedule (all that apply) ☐ II ☐ III ☐ IV ☐ V Other:

Print Form

Medication Restriction Program

- **MTF communicates to the POC which restriction type to manage pharmacy benefit**

- **Requires signature and coordination of the "Triad Team" comprised of the Provider, Nurse Case Manager, and the MTF Pharmacist**
  - Coordination between Triad Team and POC when SM is on leave or transfers for care

Civilian-Based Pharmacy Restriction Program

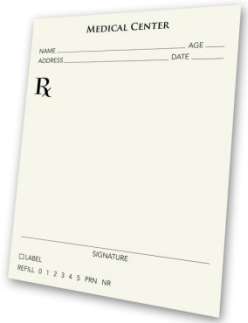
- AD Members assigned to CBWTU
- Community-based Pharmacy Restriction Form
  - Specific retail network pharmacy
  - Specific network provider

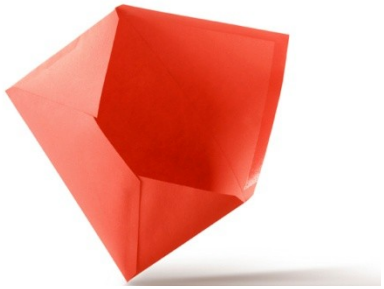
For Restriction Removal or temporary lift:

- Contact the POC at 1-866-275-4732 option 8 or send e-mail to: pdts.ameddcs@amedd.army.mil

Retail Medication Restriction Program (1-1-1)

- Express Scripts, Inc. (ESI) identifies members quarterly
- ESI sends data to Managed Care Support Contractor (MCSC) to examines medical & pharmacy claims to include / exclude in program
- ESI generates letters to members to select pharmacy, provider & medical facility
  - Letters not returned in 60 days or undeliverable are set at 100% Prepayment on all control meds
  - Member returns letter with selections
- ESI sends information to POC to enter selections in PDTS





Future initiatives

- **Enhanced messaging (PRODUR Warnings) between PDTS and CHCS for MTFs**
  - **Providers/Pharmacy will receive warning of beneficiary restriction**

OCONUS Restriction on Mail Order Pharmacy

Mr Hector Morales
Deputy Director, TMA Pharmacy Operations Center

PEC Contact Info

- **210-295-1271 (DSN 421-1271)**
  - **For PEC Clinical Staff,**

  1-866-ASK 4 PEC (275-4732)
  - **Pharmacy Operation Center**
  - **PECWEB@amedd.army.mil**
    - **Website issues**
  - **pdts.ameddcs@amedd.army.mil**
    - **Questions, assistance with PDTS, Business Objects**
  - **PECUF@amedd.army.mil**
    - **Clinical, Formulary questions**

Questions?